

Wisconsin Medicaid and BadgerCare update

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Wisconsin Medicaid and BadgerCare Information for Providers

To:

Presumptive
Eligibility for
Pregnant
Women
Providers

HMOs and Other
Managed Care
Programs

Income Limits for the Presumptive Eligibility for Pregnant Women and Family Planning Waiver Programs

This *Wisconsin Medicaid and BadgerCare Update* contains the income limits effective immediately for the Presumptive Eligibility for Pregnant Women and Family Planning Waiver programs.

The Attachment of this *Wisconsin Medicaid and BadgerCare Update* contains the income limits effective immediately for the Presumptive Eligibility for Pregnant Women and Family Planning Waiver programs. These income limits are based on the Federal Poverty Level (FPL) income limits, which change annually.

Presumptive Eligibility for Pregnant Women Program

Use the income limits in the Attachment in conjunction with the instructions in the Guide to Determining Presumptive Eligibility for Pregnant Women. To access this Guide, visit the Medicaid Web site at dhfs.wisconsin.gov/medicaid/ and do the following:

- Select the “Providers” link from the Medicaid main menu at the top of the page.
- Under “Provider Publications and Forms” select the link labeled “Provider Handbooks.”
- Select the appropriate link to the Guide to Determining Presumptive Eligibility for Pregnant Women.

Providers may also request a paper copy of the guide by calling Provider Services at (800) 947-9627 or (608) 221-9883.

Assign medical status code “PE” for women who meet the income limits for 133 percent of the FPL. Assign “P2” for women who meet the income limits for 185 percent of the FPL.

Family Planning Waiver Program

Use the income limits in the Attachment for 185 percent of the FPL to determine eligibility for the FPW program. Unlike the Presumptive Eligibility for Pregnant Women program, there is no need to differentiate between the income limits for 133 percent of the FPL and 185 percent of the FPL for this program.

Information Regarding Medicaid HMOs

This *Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at dhfs.wisconsin.gov/medicaid/.

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ATTACHMENT

Income Limits for the Presumptive Eligibility for Pregnant Women and Family Planning Waiver Programs

The following income limits are effective on and after April 1, 2004.

Table I — 133 Percent of FPL* Income Limits		Table II — 185 Percent of FPL Income Limits	
Monthly Income		Monthly Income	
Family Size	Standard	Family Size	Standard
1	\$1,031.86	1	\$1,435.29
2	\$1,384.31	2	\$1,925.54
3	\$1,736.76	3	\$2,415.79
4	\$2,089.21	4	\$2,906.04
5	\$2,441.66	5	\$3,396.29
6	\$2,794.11	6	\$3,886.54
7	\$3,146.56	7	\$4,376.79
8	\$3,499.01	8	\$4,867.04
9	\$3,851.46	9	\$5,357.29
10	\$4,203.91	10	\$5,847.54
If a family unit exceeds 10, add \$352.45 per month for each additional member.		If a family unit exceeds 10, add \$490.25 per month for each additional member.	

*FPL — Federal Poverty Level.